- 3. On or about September 13, 2012, Respondent was served by Certified and First Class Mail copies of the Accusation No. 2013-192, Statement to Respondent, Notice of Defense, Request for Discovery, and Discovery Statutes (Government Code sections 11507.5, 11507.6, and 11507.7) at Respondent's address of record which, pursuant to California Code of Regulations, title 16, section 1409.1, is required to be reported and maintained with the Board. Respondent's address of record was and is: 13103 Moorpark Street, Unit A, Sherman Oaks, CA 91423.
- 4. Service of the Accusation was effective as a matter of law under the provisions of Government Code section 11505, subdivision (c) and/or Business & Professions Code section 124.
- 5. On or about October 30, 2012, the aforementioned documents were returned by the U.S. Postal Service marked "*Unclaimed*." The address on the documents was the same as the address on file with the Board. Respondent failed to maintain an updated address with the Board and the Board has made attempts to serve the Respondent at the address on file. Respondent has not made herself available for service and therefore, has not availed herself of her right to file a notice of defense and appear at hearing.
 - 6. Government Code section 11506 states, in pertinent part:
 - (c) The respondent shall be entitled to a hearing on the merits if the respondent files a notice of defense, and the notice shall be deemed a specific denial of all parts of the accusation not expressly admitted. Failure to file a notice of defense shall constitute a waiver of respondent's right to a hearing, but the agency in its discretion may nevertheless grant a hearing.
- 7. Respondent failed to file a Notice of Defense within 15 days after service upon her of the Accusation, and therefore waived her right to a hearing on the merits of Accusation No. 2013-192.
 - 8. California Government Code section 11520 states, in pertinent part:
 - (a) If the respondent either fails to file a notice of defense or to appear at the hearing, the agency may take action based upon the respondent's express admissions or upon other evidence and affidavits may be used as evidence without any notice to respondent.

- 9. Pursuant to its authority under Government Code section 11520, the Board finds Respondent is in default. The Board will take action without further hearing and, based on the relevant evidence contained in the Default Decision Evidence Packet in this matter, as well as taking official notice of all the investigatory reports, exhibits and statements contained therein on file at the Board's offices regarding the allegations contained in Accusation No. 2013-192, finds that the charges and allegations in Accusation No. 2013-192, are separately and severally, found to be true and correct by clear and convincing evidence.
- 10. Taking official notice of its own internal records, pursuant to Business and Professions Code section 125.3, it is hereby determined that the reasonable costs for Investigation and Enforcement is \$ 8,858.75 as of October 24, 2012.

DETERMINATION OF ISSUES

- 1. Based on the foregoing findings of fact, Respondent Teri Ann Raia, a.k.a. Teri Ann Mertes, a.k.a. Teri Ann Sharbaf has subjected her Registered Nurse License No. 429644 to discipline.
 - 2. The agency has jurisdiction to adjudicate this case by default.
- 3. The Board of Registered Nursing is authorized to revoke Respondent's Registered Nurse License based upon the following violations alleged in the Accusation which are supported by the evidence contained in the Default Decision Evidence Packet in this case.:
 - A. Respondent is subject to disciplinary action under Business and Professions Code section 2761, subdivision (a), on grounds of unprofessional conduct, as defined in Business and Professions Code section 2762, subdivision (a), for violating Health and Safety Code sections 11173, subdivision (a) and/or 11350 subdivision (a) in that while employed and on duty as a registered nurse at Huntington Hospital in Pasadena, CA, between approximately November 2, 2009, and March 8, 2010, Respondent illegally obtained or possessed controlled substances and dangerous drugs, by use of fraud, deceit, misrepresentation and/or subterfuge on multiple occasions, as follows:

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- (1) PATIENT # 504 (November 2, 2009)
 - (a) Medical records, summarized below, disclose that on November 2, 2009, Respondent removed one tablet of Vicodin for Patient # 504 at 15:53 (3:53 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
 - (b) The record additionally discloses that on the same date, Respondent removed a single tablet of Vicodin for Patient # 504 at 18:42 (6:42 P.M.) but documented administration nearly 3 hours later at 21:26 (9:26 P.M.).
 - (2) PATIENT # 490 (November 5, 9, 17, 2009)
 - (a) Medical records, summarized below, disclose that on November 5, 2009, Respondent removed one tablet of Vicodin for Patient #490 at 16:13 (4:13 P.M.) There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
 - (b) Medical records, further disclose that on November 9, 2009, Respondent removed one tablet of Vicodin for Patient #490 at 16:03 (4:03 P.M.) There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
 - (c) Medical records, further disclose that on November 17, 2009, Respondent removed one tablet of Vicodin for Patient #490 at 20:34 (8:34 P.M.) There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
 - (d) A total of 3 tablets of Vicodin 5 mg are unaccountable for the referenced dates.
- (3) PATIENT #656 (November 16, 2009)
 - (a) Medical records, summarized below, disclose that November 16, 2009, Respondent removed one tablet of Vicodin for Patient #656 at 20:37 (8:37 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
- (4) PATIENT #376 (December 10, 2009)
 - (a) Medical records, summarized below, disclose that on December 10, 2009, Respondent removed two tablets of Tylenol with Codeine for Patient #376 at 20:17 (8:17 P.M.) There is no entry on the MAR or the nursing documenting

administration to the patient, leaving two tablets of Tylenol with Codeine unaccounted for.

- (5) PATIENT #527 (February 3, 8 and 9, 2010; March 3 and 8, 2010)
 - (a) Medical records, summarized below, disclose that on February 3, 2010, Respondent removed one tablet of Vicodin for Patient #527 at 19:46 (7:46 P.M.) There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
 - (b) Medical records, further disclose that on March 3, 2010, Respondent removed two tablets of Vicodin for Patient #527 at 19:37 (7:37 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving two tablets of Vicodin unaccounted for.
 - (c) Medical records further, disclose that on March 8, 2010, Respondent removed two tablets of Vicodin for Patient #527 at 17:59 (5:59 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving two tablets of Vicodin unaccounted for.
 - (d) Medical records further, disclose that on February 8, 2010, Respondent removed one tablet of Ativan for Patient #527 at 20:20 (8:20 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Ativan unaccounted for.
 - (e) Medical records summarized below, disclose that on February 9, 2010, Respondent removed one tablet of Ativan for Patient #527 at 16:18 (4:18 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Ativan unaccounted for.
 - (f) A total of 5 Vicodin 5 mg tablets and 2 Ativan 1 mg tablets are unaccountable for the referenced dates.
 - (g) The record additionally discloses that on February 9, 2010, Respondent removed a single tablet of Ativan for patient #527 at 19:56 (7:56 P.M.) but documented administration about 1 1/2 hours later at 21:30 (9:30 P.M.)
- (6) PATIENT #186 (February 6, 2010)
 - (a) Medical records, summarized below, disclose that on February 6, 2010, Respondent removed two tablets of Vicodin for Patient #186 at 16:03 (4:03 P.M.). However, the MAR and nursing notes documenting administration of only one

tablet to the patient, leaving one tablet of Vicodin unaccounted for.

- (b) Medical records further disclosed that a few minutes later, at 16:04 (4:04 P.M.) Respondent removed two more tablets of Vicodin for Patient #186. There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving two tablets of Vicodin unaccounted for.
 - (c) A total of 3 Vicodin 5 mg tablets are unaccountable for the referenced date.
- (d) The record additionally discloses that on February 6, 2010, Respondent removed another Vicodin tablet for this patient at 19:04 (7:04 P.M.) but documented administration about 2 hours later at 20:59 (8:59 P.M.).
- (7) PATIENT #1679 (March 2, 2010)
 - (a) Medical records, summarized below, disclose that on March 2, 2010, Respondent removed two tablets of Vicodin for Patient #1679 at 18:50 (6:50 P.M.). However, the MAR and nursing notes documented administration of only one tablet to the patient, leaving one tablet of Vicodin unaccounted for.
- **B.** Respondent is subject to disciplinary action under Business and Professions Code section 2761, subdivisions (a) and (d) on grounds of unprofessional conduct, as defined in Business and Professions Code section 2762, subdivision (e) for violating Health and Safety Code section sections 11350 subdivisions (a) and 11173, subdivisions (a) and (b), in that while employed as a registered nurse at Huntington Hospital between approximately November 2, 2009, and March 2, 2010, Respondent falsified, made grossly incorrect, grossly inconsistent, or unintelligible entries in hospital records of seven (7) patients pertaining to controlled substances and dangerous drugs as more fully described above in sub-paragraph 3-A.
- C. Respondent is subject to disciplinary actions under Business and Professions Code sections 2761, subdivision (a) on grounds of unprofessional conduct, in that Respondent committed unprofessional conduct while employed and on duty as a registered nurse at Huntington Hospital in Pasadena, CA. between approximately November 2, 2009, and March 8, 2010, while assigned to provide nursing care to patients No. 376, 504, 490, 656, 527, 186, and 1679 by reason of acts described more fully in subparagraph 3- A above.

<u>D</u>. Following her termination from Huntington Hospital for events described 1 in the accusation, Respondent enrolled in the Board's diversion program. On October 13, 2 2011, she was terminated unsuccessfully from the diversion program. The Board expressly 3 finds that Respondent's unsuccessful termination in October 2011 from the Board's 4 diversion program is a factor in aggravation of penalty. 5 /// 6 /// 7 /// 8 /// 10 /// 111. 11 11:1 12. /// 13 /// 14 /// 15 /// 16 /// 17 /// 18 /// 19 /// 20 /// 21 ///: 22 /// 23 /// 24 /// 25 /// 26 /// 27 /// 28 7

DEFAULT DECISION AND ORDER

ORDER

IT IS ORDERED that Registered Nurse License No. 429644, heretofore issued to Respondent Teri Ann Raia, a.k.a. Teri Ann Mertes, a.k.a. Teri Ann Sharbaf, is revoked.

Pursuant to Government Code section 11520, subdivision (c), Respondent may serve a written motion requesting that the Decision be vacated and stating the grounds relied on within seven (7) days after service of the Decision on Respondent. The agency in its discretion may vacate the Decision and grant a hearing on a showing of good cause, as defined in the statute.

This Decision shall become effective on March 8, 2013

It is so ORDERED

FOR THE BOARD OF REGISTERED NURSING DEPARTMENT OF CONSUMER AFFAIRS

default decision_LIC.rtf DOJ Matter ID:LA2012602048

Attachment:

Exhibit A: Accusation

Exhibit A

Accusation

1	KAMALA D. HARRIS			
2	Attorney General of California GREGORY J. SALUTE			
3-	Supervising Deputy Attorney General Susan Melton Wilson			
4	Deputy Attorney General State Bar No. 106902			
5	300 So. Spring Street, Suite 1702			
	Los Angeles, CA 90013 Telephone: (213) 897-4942			
6	Facsimile: (213) 897-2804 E-mail: Susan.Wilson@doj.ca.gov			
7	Attorneys for Complainant			
8				
9	BEFORE THE BOARD OF REGISTERED NURSING			
10	DEPARTMENT OF CONSUMER AFFAIRS			
11	STATE OF CALIFORNIA			
12	In the Matter of the Accusation Against: Case No. 2013-192			
13	TERI ANN RAIA,			
14	a.k.a. TERI ANN MERTES, a.k.a. TERI ANN SHARBAF ACCUSATION			
15	13103 Moorpark Street, Unit A			
16	Sherman Oaks, CA 91423			
17	Registered Nurse License No. 429644			
18	Respondent.			
19				
20	Complainant alleges:			
21	PARTIES			
22	1. Louise R. Bailey, M.Ed., RN (Complainant) brings this Accusation solely in her			
23	official capacity as the Executive Officer of the Board of Registered Nursing, Department of			
24	Consumer Affairs.			
25	2. On or about August 31, 1988, the Board of Registered Nursing issued Registered			
26	Nurse License Number 429644 to Teri Ann Raia, a.k.a. Teri Ann Mertes, a.k.a. Teri Ann Sharbaf			
. 27	(Respondent). The Registered Nurse License was in full force and effect at all times relevant			
28	herein, expired on October 31, 2011, and has not been renewed.			
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Accusation

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3. This Accusation is brought before the Board of Registered Nursing (Board),
-Department of Consumer Affairs, under the authority of the following laws. All section references are to the Business and Professions Code unless otherwise indicated.

- 4. Section 2750 of the Business and Professions Code ("Code") provides, in pertinent part, that the Board may discipline any licensee, including a licensee holding a temporary or an inactive license, for any reason provided in Article 3 (commencing with section 2750) of the Nursing Practice Act.
 - 5. Section 2761 of the Code states:

"The board may take disciplinary action against a certified or licensed nurse or deny an application for a certificate or license for any of the following:

- "(a) Unprofessional conduct, which includes, but is not limited to, the following:
- "(1) Incompetence, or gross negligence in carrying out usual certified or licensed nursing functions.
- "(d) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violating of, or conspiring to violate any provision or term of this chapter [the Nursing Practice Act] or regulations adopted pursuant to it.
 - 6. Section 2762 of the Code states:

"In addition to other acts constituting unprofessional conduct within the meaning of this chapter [the Nursing Practice Act], it is unprofessional conduct for a person licensed under this chapter to do any of the following:

"(a) Obtain or possess in violation of law, or prescribe, or except as directed by a licensed physician and surgeon, dentist, or podiatrist administer to himself or herself, or furnish or administer to another, any controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code or any dangerous drug or dangerous device as defined in Section 4022.

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- "(b) Use any controlled substance as defined in Division 10 (commencing with Section 11000) of the Health and Safety Code, or any dangerous drug or dangerous device as defined in Section 4022, or alcoholic beverages, to an extent or in a manner dangerous or injurious to himself or herself, any other person, or the public or to the extent that such use impairs his or her ability to conduct with safety to the public the practice authorized by his or her license.
- "(e) Falsify, or make grossly incorrect, grossly inconsistent, or unintelligible entries in any hospital, patient, or other record pertaining to the substances described in subdivision (a) of this section."
- 7. Section 2764 of the Code provides, in pertinent part, that the expiration of a license shall not deprive the Board of jurisdiction to proceed with a disciplinary proceeding against the licensee or to render a decision imposing discipline on the license.
- 8. Section 118, subdivision (b), of the Code provides that the suspension/expiration/surrender/cancellation of a license shall not deprive the Board/Registrar/Director of jurisdiction to proceed with a disciplinary action during the period within which the license may be renewed, restored, reissued or reinstated.
 - 9. Section 2770.11 of the Code provides:
- (a) Each registered nurse who requests participation in a diversion program shall agree to cooperate with the rehabilitation program designed by the committee and approved by the program manager. Any failure to comply with the provisions of a rehabilitation program may result in termination of the registered nurse's participation in a program. The name and license number of a registered nurse who is terminated for any reason, other than successful completion, shall be reported to the board's enforcement program.
- (b) If the program manager determines that a registered nurse, who is denied admission into the program or terminated from the program, presents a threat to the public or his or her own health and safety, the program manager shall report the name and license number, along with a copy of all diversion records for that registered nurse, to the board's enforcement

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program. The board may use any of the records it receives under this subdivision in any disciplinary proceeding."

- -Health-and-Safety-Code-Section-1-1-173-provides:
- "(a) No person shall obtain or attempt to obtain controlled substances, or procure or attempt to procure the administration of or prescription for controlled substances, (1) by fraud, deceit, misrepresentation, or subterfuge; or (2) by the concealment of a material fact.
 - Health and Safety Code Section 11350 provides:
- "(a) Except as otherwise provided in this division, every person who possesses (1) any controlled substance specified in subdivision (b) or (c), or paragraph (1) of subdivision (f) of Section 11054, specified in paragraph (14), (15), or (20) of subdivision (d) of Section 11054, or specified in subdivision (b) or (c) of Section 11055, or specified in subdivision (h) of Section 11056, or (2) any controlled substance classified in Schedule III, IV, or V which is a narcotic drug, unless upon the written prescription of a physician, dentist, podiatrist, or veterinarian licensed to practice in this state, shall be punished by imprisonment in the state prison.
- 12. Section 125.3 of the Code provides, in pertinent part, that the Board may request the administrative law judge to direct a licentiate found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

DEFINITIONS

13. Vicodin – is a Schedule II controlled substance pursuant to Health and Safety Code Section 11056 and is a dangerous drug within the meaning of Business and Professions Code section 4022, subdivision (a). Vicodin is a brand name for the narcotic hydrocodone bitartrate or dihydrocodeinone combined with the non-narcotic acetaminophen. It is used for the relief of severe pain.

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- 14. <u>Ativan</u> A Schedule IV controlled substance pursuant to Health and Safety Code Section 11057. Ativan is a brand name for Lorazepam. It is a benzodiazepine used for the relief of anxiety, panic attacks and chronic sleeplessness.
- 15. <u>Tylenol with Codeine</u> a Schedule III controlled substance pursuant to Health and Safety Code Section 11056. It is a combination of acetaminophen and codeine phosphate. It is a narcotic used for the relief of moderate to moderately severe pain.
- dispensing system, which operates similarly to an Automated Teller Machine (ATM) at a bank. The Pyxis medication dispensing machines are serviced by the facility's pharmacy. Medications are placed in the Pyxis machines, which are usually stationed throughout the hospital. These medications can only be accessed, or withdrawn by an authorized staff person using their own unique personalized access code. Each medical professional at the hospital is assigned an account number and a "one time only" access code number. The access code number allows the individual to access the Pyxis System only one time. Upon making this initial access, the Pyxis System prompts the individual to enter his or her own unique access number or PIN code. The Pyxis System will not permit the use of a PIN code that has been used by any former employee, or is being used by any other current employee. After entering their own unique PIN code and each time the Pyxis System is accessed using that PIN code, the person making access is identified and a database record of the transaction is made; which is similar to the ATM withdrawal of funds from a bank account. The Pyxis System specifically records the following:
 - 1) The identities of medical personnel, who have accessed the identified medications.
- The identities of the patients that the medications were allegedly withdrawn on behalf of and administered to.
 - 3) The date/time the medications were withdrawn by the identified employee.

The Pyxis System in response to the employee's drug withdrawals then updates the hospital's pharmacy inventory for each particular medication withdrawn. The Pyxis System records the time and date of access, and is able to provide a record of the drugs being accessed by the employee via the patient's name, the patient's ID number; the identity of the medical facility's

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employee making access; the name and quantity of the drug accessed; and location of the particular Pyxis unit accessed.

FIRST CAUSE FOR DISCIPLINE

(Obtaining Controlled Substances by Fraud, Deceit, Misrepresentation or Subterfuge)

17. Respondent is subject to disciplinary action under Business and Professions Code section 2761, subdivision (a), on grounds of unprofessional conduct, as defined in Business and Professions Code section 2762, subdivision (a), for violating Health and Safety Code sections 11173, subdivision (a) and/or 11350 subdivision (a) in that while employed and on duty as a registered nurse at Huntington Hospital in Pasadena, CA, between approximately November 2, 2009, and March 8, 2010, Respondent illegally obtained or possessed controlled substances and dangerous drugs, by use of fraud, deceit, misrepresentation and/or subterfuge on multiple occasions, as follows:

(1) **PATIENT # 504** (November 2, 2009)

- (a) Medical records, summarized below, disclose that on November 2, 2009, Respondent removed one tablet of Vicodin for Patient # 504 at 15:53 (3:53 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
- (b) The record additionally discloses that on the same date, Respondent removed a single tablet of Vicodin for Patient # 504 at 18:42 (6:42 P.M.) but documented administration nearly 3 hours later at 21:26 (9:26 P.M.).

SUMMARY OF MEDICATION RECORD - Patient # 504

PHYSICIAN'S ORDER RECORDS	ACTIVITY REPORT	MEDICATION ADMINISTRATION REPORT	
10-13-09	11-02-09	11-02-09	
Hydrocodone/APAP	1 Vicodin tablet withdrawn by	No Record of 1 Vicodin tablet	
(Vicodin) 5mg/500 mg	Raia at 15:53:00	administered to patient or	
Dose: Tab POQ6HR	•	wasted on or about 15:53:00	
	11-02-09	11-02-09	
	1 Vicodin tablet withdrawn by	Record of 1 Vicodin tablet	
	Raia at 18:42:58	administered to patient at	
	<u>·</u>	21:26	

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Medical records, summarized below, disclose that on November 5, 2009, Respondent removed one tablet of Vicodin for Patient #490 at 16:13 (4:13 P.M.) There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.

- (b) Medical records, further disclose that on November 9, 2009, Respondent removed one tablet of Vicodin for Patient #490 at 16:03 (4:03 P.M.) There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
- Medical records, further disclose that on November 17, 2009, Respondent removed one tablet of Vicodin for Patient #490 at 20:34 (8:34 P.M.) There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
- A total of 3 tablets of Vicodin 5 mg are unaccountable for the referenced dates.

SUMMARY OF MEDICATION RECORD - Patient #490

PHYSICIAN'S ORDER RECORDS	ACTIVITY REPORT	MEDICATION ADMINISTRATION REPORT
10-30-09 Hydrocodone/Acetam (Vicodin) 5mg/500mg Dose: 1 Tablet PO Q4HR PRN	11-05-09 1 Vicodin tablet withdrawn by Raia at 16:13:49	11-05-09 No record of 1 Vicodin tablet administered to patient or wasted on or about 16:13:49
	11-05-09 1 Vicodin tablet withdrawn by Raia at 20:48:25	11-05-09 Record of 1 Vicodin tablet administered to patient at 21:30
	11-09-09 1 Vicodin tablet withdrawn by Raia at 16:03:13	11-09-09 No record of 1 Vicodin tablet administered to patient or wasted on or about 16:13:49

1 2	11-09-09 1 Vicodin tablet withdrawn by Raia at 20:49:43	11-09-09 Record of 1 Vicodin tablet administered to patient at 21:00
3 4 5 6 7	11-17-09 1 Vicodin tablet withdrawn by Raia at 16:33:57 11-17-09 1 Vicodin tablet withdrawn by Raia at 20:34:18	11-17-09 Record of 1 Vicodin tablet administered to patient at 17:00 11-17-09 No record of 1 Vicodin tablet administered to patient or wasted on or about 20:34:18

(3) PATIENT #656 (November 16, 2009)

(a) Medical records, summarized below, disclose that November 16, 2009, Respondent removed one tablet of Vicodin for Patient #656 at 20:37 (8:37 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.

SUMMARY	OF MEDICATION RECORD -	Patient #656
PHYSICIAN'S ORDER RECORDS	ACTIVITY REPORT	MEDICATION ADMINISTRATION REPORT
11-10-09 Hydrocodone/Acetam (Vicodin) 5mg/500mg Dose: 1 tablet PO Q4H PRN	11-16-09 1 Vicodin tablet withdrawn by Raia at 17:08:22	11-16-09 Record of 1 Vicodin tablet administered to patient at 17:10
	11-16-09 1 Vicodin tablet withdrawn by Raia at 20:37:58	11-16-09 No record of 1 Vicodin tablet administered to patient or wasted on or about 20:37:58

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(4) **PATIENT #376** (December 10, 2009)

(a) Medical records, summarized below, disclose that on December 10, 2009, Respondent removed two tablets-of Tylenol-with-Codeine for Patient #376-at-20:17-(8:17-P.M.) There is no entry on the MAR or the nursing documenting administration to the patient, leaving two tablets of Tylenol with Codeine unaccounted for.

SUMMARY OF MEDICATION RECORD – Patent #376			
PHYSICIAN'S ORDER RECORDS	ACTIVITY REPORT	MEDICATION ADMINISTRATION REPORT	
12-02-09 Codeine Phos/APAP (Tylenol #3) Dose: 1 Tablet PO Q4H PRN	12-10-09 2 Tylenol #3 tablets withdrawn by Raia at 20:17:03	12-10-09 No record of 2 Tylenol #3 tablets administered to patient or wasted	

(5) PATIENT #527 (February 3, 8 and 9, 2010; March 3 and 8, 2010)

- (a) Medical records, summarized below, disclose that on February 3, 2010, Respondent removed one tablet of Vicodin for Patient #527 at 19:46 (7:46 P.M.) There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Vicodin unaccounted for.
- (b) Medical records, further disclose that on March 3, 2010, Respondent removed two tablets of Vicodin for Patient #527 at 19:37 (7:37 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving two tablets of Vicodin unaccounted for.
- (c) Medical records further, disclose that on March 8, 2010, Respondent removed two tablets of Vicodin for Patient #527 at 17:59 (5:59 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving two tablets of Vicodin unaccounted for.

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- (d) Medical records further, disclose that on February 8, 2010, Respondent removed one tablet of Ativan for Patient #527 at 20:20 (8:20 P.M.). There is no entry on the MAR-or-the-nursing-notes-documenting-administration-to-the-patient, leaving-one-tablet-of-Ativan unaccounted for.
- (e) Medical records summarized below, disclose that on February 9, 2010, Respondent removed one tablet of Ativan for Patient #527 at 16:18 (4:18 P.M.). There is no entry on the MAR or the nursing notes documenting administration to the patient, leaving one tablet of Ativan unaccounted for.
- (f) A total of 5 Vicodin 5 mg tablets and 2 Ativan 1 mg tablets are unaccountable for the referenced dates.
- (g) The record additionally discloses that on February 9, 2010, Respondent removed a single tablet of Ativan for patient #527 at 19:56 (7:56 P.M.) but documented administration about 1 1/2 hours later at 21:30 (9:30 P.M.)

SUMMARY OF MEDICATION - Patient #527			
PHYSICIAN'S ORDER	ACTIVITY REPORT	MEDICATION	
RECORDS		ADMINISTRATION	
01-23-10 Hydrocodone/Acetam (Vicodin) 5mg/500mg Dose: 1 table PO	02-03-10 1 Vicodin tablet withdrawn by Raia at 16:14:17	02-03-10 Record of 1 Vicodin tablet administered to patient at 17:00	
Q4H PRN	02-03-10 1 Vicodin tablet withdrawn by Raia at 19:46:38	02-03-10 No record of 1 Vicodin tablet administered to patient or wasted on or about 19:46:38	
Hydrocodone/Acetam (Vicodin) 5mg/500mg	03-03-10 2 Vicodin tablets withdrawn by Raia at 19:37:58	03-03-10 No record of 2 Vicodin tablets administered to patient or wasted on or about 19:37:58	
	03-08-10 2 Vicodin tablets withdrawn by Raia 17:59	03-08-10 No record of 2 Vicodin tablets administered to patient or wasted	

	Manager Control	••••	
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1 2	Lorazepam (Ativan) 1 mg tablet	02-08-10 1 Ativan tablet withdrawn by Raia at 20:20:03	No record of 1 Ativan tablet administered to patient or wasted on or
3	·	02-09-10	-about-20:20:03
5		1 Ativan tablet withdrawn by Raia at 16:18:55 02-09-10	No Record of 1 Ativan tablet administered to patient or wasted on or about 16:18:55
6		1 Ativan tablet withdrawn by	02-09-10
7 8		Raia at 19:56:13	Record of 1 Ativan tablet administered to patient at 21:30
9	(6) <u>PATIENT #1</u>	86 (February 6, 2010)	
10	•	records, summarized below, disc	lose that on February 6, 2010,
11	Respondent removed two	tablets of Vicodin for Patient #18	6 at 16:03 (4:03 P.M.).
12	However, the MAR and n	ursing notes documenting admini	stration of only one tablet to the
13	patient, leaving one table	t of Vicodin unaccounted for.	
14	(b) Medical	records further disclosed that a fe	ew minutes later, at 16:04 (4:04
15	P.M.) Respondent remove	d two more tablets of Vicodin for	Patient #186. There is no entr
16	on the MAR or the nursing	g notes documenting administration	on to the patient, leaving two
17	tablets of Vicodin unacco	ounted for.	
18	(c) A total of	of 3 Vicodin 5 mg tablets are unac	countable for the referenced
19	date.		
20	(d) The reco	ord additionally discloses that on l	February 6, 2010, Respondent
21	removed another Vicodin	tablet for this patient at 19:04 (7:0	04 P.M.) but documented
22	administration about 2 hou	nrs later at 20:59 (8:59 P.M.).	
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Accusation

DOI:III.ZXX	OF MEDICATION RECORD	- rauent #180
PHYSICIAN'S ORDER RECORDS	ACTIVITY REPORT	MEDICATION ADMINISTRATION
01-29-10 Hydrocodone/Acetam (Vicodin) 5 mg/500 mg Dose: 2 Tablets PO Q4HR PRN	02-06-10 2 Vicodin tablets withdrawn by Raia at 16:03:36	REPORT 02-06-10 Record of 1 Vicodin tablet administered to patient at 16:30
	02-06-10 2 Vicodin tablets withdrawn by Raia at 16:04:18	02-06-10 No Record of 2 Vicodin tablets administered to patient or wasted on or about 16:04:18
	02-016-10 1 Vicodin tablet withdrawn by Raia at 19:04:36	02-06-10 Record of 1 Vicodin tablet administered to patient at 20:59

(7) PATIENT #1679 (March 2, 2010)

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(a) Medical records, summarized below, disclose that on March 2, 2010, Respondent removed two tablets of Vicodin for Patient #1679 at 18:50 (6:50 P.M.). However, the MAR and nursing notes documented administration of only one tablet to the patient, leaving one tablet of Vicodin unaccounted for.

SUMMARY OF MEDICATION RECORD – Patent #1679			
PHYSICIAN'S ORDER RECORDS	ACTIVITY REPORT	MEDICATION ADMINISTRATION REPORT	
2-27-10 Hydrocodone/Acetam (Vicodin) 5mg/500mg Dose: 1 tablet PO Q6HR PRN	3-02-10 2 Vicodin tablets withdrawn by Raia at 18:50	3-02-10 Record of 1 Vicodin tablet administered to patient	

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SECOND CAUSE FOR DISCIPLINE

(Falsified Hospital Records)

Respondent is subject to disciplinary action under Business and Professions Gode section 2761, subdivisions (a) and (d) on grounds of unprofessional conduct, as defined in Business and Professions Code section 2762, subdivision (e) for violating Health and Safety Code section sections 11350 subdivisions (a) and 11173, subdivisions (a) and (b), in that while employed as a registered nurse at Huntington Hospital between approximately November 2, 2009, and March 2, 2010, Respondent falsified, made grossly incorrect, grossly inconsistent, or unintelligible entries in hospital records of seven (7) patients pertaining to controlled substances and dangerous drugs as more fully described in paragraph 17 above.

THIRD CAUSE FOR DISCIPLINE

(Unprofessional Conduct)

19. Respondent is subject to disciplinary actions under Business and Professions Code sections 2761, subdivision (a) on grounds of unprofessional conduct, in that Respondent committed unprofessional conduct while employed and on duty as a registered nurse at Huntington Hospital in Pasadena, CA. between approximately November 2, 2009, and March 8, 2010, while assigned to provide nursing care to patients No. 376, 504, 490, 656, 527, 186, and 1679 by reason of acts, described more fully in paragraph 17 above.

OTHER MATTERS

- 20. In order to determine the degree of discipline, if any, to be imposed on Respondents, Complainant alleges as follows:
- a. Following her termination from Huntington Hospital for events which are the subject of this accusation, Respondent enrolled in the Board's diversion program. On October 13, 2011, she was terminated unsuccessfully from the diversion program.

PRAYER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

Accusation